

**CAMPBELL COUNTY DEPARTMENT OF HOUSING
SECTION 8 HOUSING CHOICE VOUCHER PROGRAM
P.O. BOX 72424 ♦ 1098 MONMOUTH ST, NEWPORT, KY 41071
859-261-5200 TDD 859-261-6144**

PERSONAL DECLARATION

THE FOLLOWING IS TO BE COMPLETED IN THE APPLICANT'S OWN HANDWRITING. ALL QUESTIONS MUST BE ANSWERED TRUTHFULLY AND ACCURATELY. FAILURE TO FULLY COMPLETE THIS FORM WILL RESULT IN TERMINATION OF YOUR APPLICATION OR VOUCHER. PLEASE PRINT.

FAMILY COMPOSITION:

Head of Household full name: _____

Current address: _____

Phone number: _____ Date of Birth: _____

MM/ DD/ YYYY

Birthplace: _____ Social Security number: _____

City/ State

What is your marital status? Single _____ Married _____ Separated _____ Widowed _____ Divorced _____
Date _____ Date _____ Date _____ Date _____

Spouse or other adult's full name: _____

Date of Birth: _____ Birthplace: _____ Social Security number: _____

MM/ DD/ YYYY

City/ State

If separated or divorced, provide following information regarding spouse/ ex-spouse(s):

Full Legal Name _____ Full Legal Name _____

Street Address _____ Street Address _____

City, State, Zip, Telephone _____ City, State, Zip, Telephone _____

Have you or anyone in your household ever used any name(s) or Social Security number(s) other than the one you are currently using? Yes _____ No _____ If yes, explain: _____

List all household members (use additional page if needed):

<u>Name</u>	<u>Relationship</u>	<u>Race</u>	<u>Date of Birth</u>	<u>School</u>	<u>Absent Parent(s) Name, Address, and Phone</u>
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Are there any other persons not mentioned above whom live or will live in your household? Yes _____ No _____

If yes explain: _____

INCOME: List all money earned by everyone living in your household. This includes money from wages, self-employment, child support, contributions, Social Security, disability payments (SSI), Workers Compensation, retirement/pensions, AFDC, Welfare, Veteran Benefits, unemployment benefits, rental property income, property settlement, stock dividends, interest from bank accounts and stock dividends, alimony, and all other income: _____

Where have you worked during the past 5 years? _____

During the last calendar year, did you file a tax return? (Federal or State): _____

ASSETS: If "yes" to any, list below. Do you or any household member own or have any interest in any real estate, boat, and/ or mobile home? _____ Have you sold any real estate in the last 2 years? _____ Do you own any stocks or bonds? _____ Do you have a savings or checking account? _____ If "yes" give bank, account numbers and amounts below. Do own a car or truck? _____ Model/ Year: _____ Tag number: _____

EXPENSES: How much rent do you currently pay? \$ _____ What utilities do you pay and what is the average cost of each? _____

List other monthly expenses: _____

Does anyone outside of your household pay any of your bills or give you money? _____

Do you have medical insurance? _____ What policy? _____

Have you or any member of your household ever lived been on any Section 8 Program or lived in Public Housing? _____

List where and when: _____

Have you ever committed any fraud in a Federal housing assistance program or been requested to repay any money for knowingly misrepresenting information for such programs? _____ If "yes" explain: _____

Have you ever been charged with a debt to, required to pay money back to, or currently owe money to, any Federal housing assistance program for any reason? _____ If yes, please explain: _____

Have you ever been **charged** with or convicted of any criminal offense, drug offense, or felony offense? _____ If "yes" explain: _____

Please certify that you have performed a cursory review of your unit and notified the housing authority of any repairs/defects that have not been addressed by your landlord? _____ Note any defects/repairs needed here: _____

(Initial here to certify)

I do hereby swear and attest that all of the information above about me is true and accurate. I also understand that all changes in the income of any member of the household as well as any changes in the household members must be reported to the Campbell County Department of Housing IN WRITING IMMEDIATELY.

Signature of Head of Household _____ Date _____

Signature of Spouse _____ Date _____

Signature of Other Adult _____ Date _____

Signature of Other Adult _____ Date _____

WARNING! SECTION 1001 OF TITLE 18 OF THE U.S. CODE makes it a criminal offense to make willful false statements or misrepresentation to any department of the United States as to any matter within its jurisdiction. It is also a criminal offense under the KENTUCKY REVIES STATUTES to make willful false statements to this agency